NOTICE OF FILING/CLAIM FEE(S) DUE TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS FEE CALCULATION SHEET WITH YOUR RESPONSE.

•	•
APPLICATION NUMBER:	

Total Fee Calculation

	Fee Code	Totai	Number Extra	<u> </u>	F⇔	Fee ≇	Total
	Sm./Lz				Sm: Entity	Lg. Entity	290
Facia Filing Fee	201/101					72	. / 10 /76
Total Claims >20	203/103) = <u> </u>	X		82	246
Independent Claims >3	202/102		:= <u> </u>	X		00	
Mult. Dep Claim Present	204/104						130
Surcharge	205/105				<u></u>		3
English Translation	139	· · · · · · · · · · · · · · · · · · ·					
TOTAL FEE CALCU	LATION						1342

Fees due upon filing the application:

1347 Total Filing Fees Due = S

60b Less Filing Fees Submitted

BALANCE DUE

1-5-7-10-22-25-Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 1997 **CLAIMS AS FILED - PART I** SMALL ENTITY **OTHER THAN** (Column 1) (Column 2) TYPE OR **SMALL ENTITY FOR** NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE **BASIC FEE** 395.00 790.00 OR **TOTAL CLAIMS** minus 20 = x\$11=x\$22= OR INDEPENDENT CLAIMS 6 minus 3 = x41 =x82 =OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL **TOTAL** OR **CLAIMS AS AMENDED - PART II** OTHER THAN (Column 1) (Column 2) (Column 3) **SMALL ENTITY OR SMALL ENTITY CLAIMS** HIGHEST REMAINING NUMBER PRESENT ADDI-ADDI-**AFTER PREVIOUSLY** RATE **AMENDMENT EXTRA TIONAL** RATE TIONAL AMENDMENT PAID FOR FEE FEE Total Minus x\$11=x\$22=OR Independent Minus x41 =OR x82 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= OR +270= TOTAL TOTAL OR ADDIT. FEE ADDIT, FEE (Column 1) (Column 3) (Column 2) **CLAIMS** HIGHEST REMAINING $\mathbf{\omega}$ ADDI-NUMBER PRESENT ADDI-**AFTER** RATE **TIONAL** RATE AMENDMENT **PREVIOUSLY EXTRA** TIONAL AMENDMENT FEE FEE PAID FOR Total Minus x\$11=OR x\$22=Independent Minus x41 =OR x82 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= OR +270= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 3) (Column 2) **CLAIMS** HIGHEST REMAINING ADDI-**PRESENT** ADDI-NUMBER **AFTER** RATE TIONAL RATE TIONAL MENDMENT **PREVIOUSLY EXTRA** AMENDMENT FEE FEE PAID FOR **Total** Minus x\$11=x\$22= _ OR Independent Minus x41 =OR x82 =₹ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= +270= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL TOTAL OR ADDIT FEE ADDIT, FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.